## State of South Dakota Statement of Financial Interest **Elected Official**

RECEIVED

Elected Official

JAN 1 2 2005

File statement within 15 days after taking your oath of office in the office where your nominating petition or convention nomination certification was filed. Please read information on reverse side before completing this

IONI.	***************************************
1 Novetous	<u> </u>
1. Name $\frac{7}{100000000000000000000000000000000000$	Meadows Aberdeen SD
2. Address 3621 80/1/19	Meadows Aperocen SD
3. Elected Office House of Repre	esentatives 574
If there is no change in your financial interest since the filing of sign and return.	of your postnomination statement of financial interest, please
Date:	2. Mm
If there are changes, please complete the following:	
4. What is your occupation/profession?	
5. List any enterprise which accounted for more than ten percent of, or contributed more than \$2,000 to, your family's (includes spouse, minor children living at home) gross income in the preceding calendar year. Identify who receives the income from each enterprise.	What is the nature of your immediate family's association with each? The value of the financial interest need not be reported.
6. List any enterprise in which you, your spouse or minor children living at home control more than ten percent of the capital or stock. Identify who has the ownership interest in each enterprise.	What is the nature of your immediate family's association with each?
	Filed this 12/44
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State of South Dakota )  County of	Verification SECRETARY OF STATE
I have reviewed paragraphs 1 through 6 of the Information Re	payrding Statement of Financial Interest (attached), MV
Statement of Financial Interest and certify that the information my financial interests for the preceding calendar year.	
Signed (Signed)	<u> </u>
Sworn to before me this day of	190 3005
(\$ea)	Officer Administering Oath  My commission expires: 7 18 0
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## State of South Dakota **Statement of Financial Interest Candidate for Public Office**

RECEIVED MAR 3 0 2004

S.D. SEC. OF STATE File statement in the office where your nominating petition or convention nomination certification was filed.

Please read information on reverse side before completing this form.

1. Name Al Novstrup	**************************************
1. Name	Filed thus
2. Address 3629 Rolling Meadows Aberdeen, SD 57401	Maria
Office Sought State Representative District 3	Of Or Or Or
4. What is your occupation/profession? Manager of Family F	Fun Park  SECRETARY OF STATE
5. List any enterprise which accounted for more than ten percent of, or contributed more than \$2,000 to, your family's (includes spouse, minor children living at home) gross income in the preceding calendar year. Identify who receives the income from each enterprise.	What is the nature of your immediate family's association with each? The value of the financial interest need not be reported.
Thunder Road - Al, Kathy and David Novstrup	Shareholder and Manager
220 S. Main Building Rental - Al and Kathy Novstrup	Owner
First United Methodist Church - Kathy Novstrup	Employee
State Legislature - Al Novstrup	Employee
6. List any enterprise in which you, your spouse or minor children living at home control more than ten percent of the capital or stock. Identify who has the ownership interest in each enterprise.  Thunder Road of Sioux Falls - Al Novstrup	What is the nature of your immediate family's association with each? Shareholder and Manager
Thunder Road of Watertown - Al Novstrup	Shareholder
Thunder Road of Fargo - Al Novstrup	Shareholder
Wylie Go-Kart, Inc Al Novstrup	Shareholder and Manager
State of South Dakota ) SS. County of Brown	Verification
I have reviewed paragraphs 1 through 6 of the Information Rostatement of Financial Interest and certify that the information my financial interests for the preceding calendar year.	egarding Statement of Financial Interest (attached), my n reported is a complete, true and accurate representation of
(Signed	1) /4.1/ow
Sworn to before me this 23rd day of March	. 20 <u>04</u> .
(Seal)	Notary Public Officer Administering Oats
Revised 1997	My commission expires: 2-15-05